



DEPARTMENT OF HEALTH & HUMAN SERVICES

Region VI
Health Care Financing
Administration
1301 Young Street
Room 833
Dallas, Texas 75202

August 25, 1998

Our Reference: WA-OK#0256.90.04

Mr. Michael Fogarty
State Medicaid Director
Oklahoma Health Care Authority
4545 North Lincoln Boulevard - Suite 124
Oklahoma City, Oklahoma 73105

Dear Mr. Fogarty:

I am pleased to inform you that your amendment request for the Oklahoma Home and Community-Based Services (HCBS) Waiver 0256.90 has been approved with an effective date of July 1, 1998. This HCBSW program, as authorized under the provisions of 1915(c) of the Social Security Act, provides home and community-based services as an alternative to institutional long term care services for the aged and disabled. This amendment has been assigned control number 0256.90.04. This control number should be used in all future correspondence regarding the waiver.

Specifically, this technical amendment changes the minimum number of cases for the Medicaid Agency to audit for monitoring of the plan of care approval/certification process from 10% to 3%. The waiver is revised to incorporate changes in the provider qualifications section due to Oklahoma State law requiring licensing of Respiratory Therapists. In addition, the waiver is modified to incorporate revisions to the service plan form and instructions.

For your convenience, we have enclosed a copy of the approved waiver replacement pages. If you have any questions, please contact Joe Reeder at (214) 767-6279.

Sincerely,

James Randolph Farris, M.D.
Regional Administrator

Enclosure

cc: Director, Center for Medicaid and State Operations

Oklahoma Amendment No. 0256.90.04
Page Changes

- (1) Appendix B-2 Provider Qualifications Chart Page 24
- (2) Appendix B-1 Provider Qualifications Page 25-g
- (3) Appendix E-2, Medicaid Agency Approval Page 37-b
- (4) Advantage Service Plan Page 37-c
- (5) Instructions for LTCA6e Service Plan Pages 37-d, 37-e